PART B - FEE(S) TRANSMITTAL

Complete and send	SEP 1 0 20	07 B	or <u>Fax</u>	Commissioner 10 P.O. Box 1450 Alexandria, Virg (571)-273-2885	inia 22313		
INSTRUCTIONS: This for appropriate. All further con indicated unless corrected maintenance fee notification	rm reguld be used for respondence including below are directed outside.	or to smitting the ISSU to Patent, advance of the se in Block 1, by (a	JE FEE and PUBLIC ders and notification a) specifying a new co	ATION FEE (if requ of maintenance fees v orrespondence address	ired). Blocks will be mailed ; and/or (b) in	I through 5 sh to the current dicating a sepa	nould be completed where correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPONDENCE		ck 1 for any change of address)		Note: A certificate of Fee(s) Transmittal. Th	mailing can o	only be used for	r domestic mailings of the or any other accompanying nt or formal drawing, must
CARRIER BLAC 24101 NOVI ROA SUITE 100	CKMAN AND A	ASSOCIATES		Cell hereby certify that the States Postal Service of addressed to the Mai transmitted to the USF	rtificate of Ma his Fee(s) Tran with sufficient I Stop ISSUE PTO (571) 273	atling or Transmismittal is being postage for firs EEE address -2885, on the date	nission deposited with the United t class mail in an envelope above, or being facsimile ate indicated below.
9/11/2007 Kinz KHH 4837500		Nancy Car	rier/		(Depositor's name)		
01 FC:1501 1400.00 OP 02 FC:1504 300.00 OP				9,6,07	('au	<u> </u>	(Signature) · (Date)
APPLICATION NO.	ATION NO. FILING DATE		FIRST NAMED INVENTOR ATT		ATTORNEY	DOCKET NO.	CONFIRMATION NO.
10/532,149 TITLE OF INVENTION: L	09/14/2005 INE ILLUMINATINO	DEVICE AND IMAGE	Tomihisa Saito E-SCANNING DEVIC	E INCORPORATING	KNI-2 G LINE-ILLUI		6483 EVICE
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	E FEE TOT	AL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	11/13/2007
EXAMINE	ER	ART UNIT	CLASS-SUBCLASS				•
WARD, JOI	HN A	2885	362-615000			•	
1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required.	(1) the names of u or agents OR, alten (2) the name of a s registered attorney	of a single firm (having as a member a corney or agent) and the names of up to latent attorneys or agents. If no name is					
(A) NAME OF ASSIGN	an assignee is identi 137 CFR 3.11. Compl EE Sheet Glass	ied below, no assignee etion of this form is NO	data will appear on the Tasubstitute for filing (B) RESIDENCE: (COOSaka, J	e patent. If an assign an assignment. ITY and STATE OR (COUNTRY)		ocument has been filed for
4a. The following fee(s) are 22 Issue Fee 23 Publication Fee (No s	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required foe(s), any deficiency, or credit any						
5. Change in Entity Status a. Applicant claims S	☐ b. Applicant is no	longer claiming SMA	LL ENTITY s	tatus. See 37 CF	name of Carrier Blackman + Associ R 1.27(g)(2).		
NOTE: The Issue Fee and P interest as shown by the reco	ublication Fee (if requ ords of the United State	ired) will not be accepted as Patent and Trademark	from anyone other th Office.	an the applicant; a reg	istered attorne	y or agent; or th	e assignee or other party in
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+		arrier			No. 31,74		<u>-</u>
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